

County: Grant
HEARTLAND HEALTH CARE CENTER - PLATTEVILLE
1300 NORTH WATER STREET
PLATTEVILLE 53818 Phone: (608) 348-2453

Facility ID: 7120

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Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 100
Total Licensed Bed Capacity (12/31/01): 100
Number of Residents on 12/31/01: 89

Ownership:
Highest Level License:
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 92

Corporation
Skilled

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No					1 - 4 Years		27.0	
Supp. Home Care-Personal Care	No					More Than 4 Years		41.6	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	5.6			31.5	
Day Services	No	Mental Illness (Org./Psy)	25.8	65 - 74	6.7				
Respite Care	Yes	Mental Illness (Other)	3.4	75 - 84	38.2			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	37.1				
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	12.4				
Congregate Meals	No	Cancer	2.2			*****			
Home Delivered Meals	No	Fractures	7.9			Full-Time Equivalent			
Other Meals	No	Cardiovascular	11.2	65 & Over	94.4	Nursing Staff per 100 Residents			
Transportation	No	Cerebrovascular	14.6			(12/31/01)			
Referral Service	Yes	Diabetes	3.4	Sex	%	RNs		9.0	
Other Services	No	Respiratory	2.2			LPNs		7.0	
Provide Day Programming for Mentally Ill	No	Other Medical Conditions	29.2	Male	31.5	Nursing Assistants,			
Provide Day Programming for Developmentally Disabled	No		100.0	Female	68.5	Aides, & Orderlies			
								37.1	

Method of Reimbursement

Medi care (Title 18)				Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care					
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of All
Int. Skilled Care	0	0.0	0	1	1.9	99	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.1
Skilled Care	9	100.0	271	51	94.4	85	1	100.0	94	25	100.0	133	0	0.0	0	0	0.0	0	86	96.6
Intermediate	---	---	---	2	3.7	72	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.2
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	9	100.0		54	100.0		1	100.0		25	100.0		0	0.0		0	0.0		89	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	5.4	Daily Living (ADL)	Independent			
Private Home/With Home Health	7.5	Bathing	6.7	71.9	21.3	89
Other Nursing Homes	10.8	Dressing	12.4	70.8	16.9	89
Acute Care Hospitals	74.2	Transferring	30.3	47.2	22.5	89
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	24.7	51.7	23.6	89
Rehabilitation Hospitals	0.0	Eating	47.2	40.4	12.4	89
Other Locations	2.2	*****				
Total Number of Admissions	93	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	5.6	Receiving Respiratory Care		5.6
Private Home/No Home Health	12.6	Occ/Freq. Incontinent of Bladder	48.3	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	32.6	Occ/Freq. Incontinent of Bowel	36.0	Receiving Suctioning		1.1
Other Nursing Homes	4.2			Receiving Ostomy Care		3.4
Acute Care Hospitals	8.4	Mobility		Receiving Tube Feeding		5.6
Psych. Hosp. -MR/DD Facilities	2.1	Physically Restrained	3.4	Receiving Mechanically Altered Diets		41.6
Rehabilitation Hospitals	0.0					
Other Locations	8.4	Skin Care		Other Resident Characteristics		
Deaths	31.6	With Pressure Sores	5.6	Have Advance Directives		24.7
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	95			Receiving Psychoactive Drugs		58.4

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group Ratio	Bed Size: 100-199 Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92.0	82.5 1.12	84.1 1.09	85.8 1.07	84.6	1.09
Current Residents from In-County	73.0	74.3 0.98	79.3 0.92	69.4 1.05	77.0	0.95
Admissions from In-County, Still Residing	22.6	19.8 1.14	25.5 0.88	23.1 0.98	20.8	1.09
Admissions/Average Daily Census	101.1	148.2 0.68	110.2 0.92	105.6 0.96	128.9	0.78
Discharges/Average Daily Census	103.3	146.6 0.70	110.6 0.93	105.9 0.97	130.0	0.79
Discharges To Private Residence/Average Daily Census	46.7	58.2 0.80	41.2 1.14	38.5 1.21	52.8	0.89
Residents Receiving Skilled Care	97.8	92.6 1.06	93.8 1.04	89.9 1.09	85.3	1.15
Residents Aged 65 and Older	94.4	95.1 0.99	94.1 1.00	93.3 1.01	87.5	1.08
Title 19 (Medicaid) Funded Residents	60.7	66.0 0.92	66.9 0.91	69.9 0.87	68.7	0.88
Private Pay Funded Residents	28.1	22.2 1.27	23.1 1.21	22.2 1.26	22.0	1.28
Developmentally Disabled Residents	0.0	0.8 0.00	0.6 0.00	0.8 0.00	7.6	0.00
Mentally Ill Residents	29.2	31.4 0.93	38.7 0.75	38.5 0.76	33.8	0.86
General Medical Service Residents	29.2	23.8 1.23	21.8 1.34	21.2 1.38	19.4	1.50
Impaired ADL (Mean)	47.6	46.9 1.02	48.4 0.99	46.4 1.03	49.3	0.97
Psychological Problems	58.4	47.2 1.24	51.9 1.13	52.6 1.11	51.9	1.13
Nursing Care Required (Mean)	7.9	6.7 1.18	7.5 1.05	7.4 1.06	7.3	1.07